



Tennessee Department of Education – Office of Educator Licensing

710 James Robertson Parkway - Andrew Johnson Tower, 12th Floor - Nashville, TN 37243

The information on this page must accompany any request for licensure transactions in the State of Tennessee. Please complete using black ink. Required items are identified with an asterisk (*). **The personal affirmation section must be completed.**

SECTION 1. CONTACT AND DEMOGRAPHIC INFORMATION

This section must be completed. Please be certain to provide accurate information.

First Name*	Middle Name*	Last Name*	(Maiden/Other Last Name)	
<hr/>				
Date of Birth* (MM/DD/YYYY)	Street/P.O. Box*	City*	State*	Zip Code*
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Primary Telephone Number* (999) 999-9999	Secondary Telephone Number (999) 999-9999		Social Security Number* 999-99-9999	
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Primary Email Address*		Secondary Email Address		

The following information is collected for the purposes of federal reporting requirements. Please provide responses for ethnicity, race and gender.

- Ethnicity – Choose one ☐ Hispanic or Latino ☐ Not Hispanic or Latino
- Race – Mark all that apply ☐ American Indian or Alaska Native ☐ Asian
☐ Black or African American ☐ Native Hawaiian/Other Pacific Islander
☐ White
- Gender ☐ Male ☐ Female

SECTION 2. PERSONAL AFFIRMATION*

This section must be completed. False statements made in this application may constitute grounds to take action, revoke or deny a license. Check the appropriate response for each question. Do not include matters that the State Board of Education has previously investigated and found “No Probable Cause” to take any disciplinary action.

- ☐ Yes ☐ No 1. Have you been convicted of a felony, including conviction on a plea of guilty, a plea of *nolo contendere* or granting pre-trial diversion?
- ☐ Yes ☐ No 2. Have you ever been convicted of the illegal possession of drugs, including conviction on a plea of guilty, a plea of *nolo contendere* or an order granting pre-trial diversion?
- ☐ Yes ☐ No 3. Have you had a teacher’s certificate/license revoked, suspended or denied, or have you voluntarily relinquished a certificate/license. (Allowing a license to expire does not apply.)
- ☐ Yes ☐ No 4. Is there any action pending against your certification/license or application in another state?

- If you have answered “Yes” to question 1 or 2, please attach details of conviction, include date and location of conviction, and court certified copies of the judgment, conviction, and sentencing.
- If you have answered “Yes” to question 3 or 4, please attach details naming the state and/or issuing authority and explain the circumstances.

SECTION 3. SIGNATURE AND DATE

This section must be completed.

Applicant Signature

Date

SECTION 4. LICENSURE TRANSACTION REQUESTED

Please indicate the type(s) of licensure transaction(s) being requested. Mark all that apply.

☐ Initial Licensure ☐ Licensure Advancement ☐ Licensure Renewal ☐ Reactivating an Inactive License ☐ Waiver or Permit
☐ Additional Endorsement ☐ JROTC ☐ International Teacher Exchange License ☐ Other: _____

APPLICATION FOR RENEWAL OF PROFESSIONAL TEACHER OR SCHOOL SERVICE PERSONNEL LICENSES

ALL DOCUMENTS SUBMITTED TO THE OFFICE OF EDUCATOR LICENSING BECOME THE PROPERTY OF THE STATE DEPARTMENT OF EDUCATION AND WILL NOT BE RETURNED TO THE APPLICANT NOR WILL THE DEPARTMENT PROVIDE COPIES OF DOCUMENTS TO THE APPLICANT OR THIRD PARTIES.

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT

RENEWAL OPTIONS

OPTION A

Professional level license holders who hold an advanced degree and have accrued five (5) years acceptable educator experience within the ten (10) year validity period of license.

(ex: validity period may be 2000-2010)

EDUCATORS DESIRING RENEWAL USING ADVANCED DEGREE AND EXPERIENCE

Check appropriate block(S)

- _____ All experience accrued in a Tennessee public school
- _____ Experience accrued in a Tennessee public school not on file in SDE attached

OR

- _____ Experience verification form signed by Director of schools to verify at least five (5) years of educator experience in an approved private school or an out of state public school is attached

Link to experience verification form - www.tn.gov/education/lic/doc/ed2034a.pdf

OPTION B

Professional level license holders with less than an advanced degree OR an advanced degree with less than five (5) years acceptable educator experience within the ten (10) year validity period of license.

(ex: validity period may be 2000-2010)

EFFECTIVE AUGUST 1, 2013

EDUCATORS DESIRING RENEWAL USING PROFESSIONAL DEVELOPMENT MUST SUBMIT
VALIDATED DOCUMENTATION

Check appropriate block(s)

- _____ Completed computation sheet reflecting 90 renewal points attached (ALL APPLICANTS)
- _____ Employed in a Tennessee public school system
- _____ Part I of renewal computation sheet completed by both educator & supervisor
- _____ Supporting documentation for each activity attended attached (certificates, CEU transcript, college transcript) * **NEW**

OR

- _____ Not employed in a Tennessee public school system (not employed, employed out of state, or employed a TN private school)
- _____ Part II of renewal computation sheet signed by educator

Link to renewal computation sheet - www.tn.gov/education/lic/doc/ed5342.pdf

- _____ Supporting documentation for each activity attended attached (certificates, CEU transcript, college transcript) ALL APPLICANTS

OPTION C

Issued a Professional license prior to July 1, 1984 but did not teach in a Tennessee public school or appropriately accredited private school before that date and the license has not been renewed. Professional license will be converted to an Apprentice or Out of State License.

(Note- If Professional license has ever been renewed conversion is no longer an option)

- _____ Verification of out of state experience - if applicable (use experience verification form provided)

Link to experience verification form - www.tn.gov/education/lic/doc/ed2034a.pdf